OFFICIAL

Revision:

HCFA-PM-94-5 APRIL 1994 (MB)

State/Territory: RHODE ISLAND

SECTION 3 - SERVICES: GENERAL PROVISIONS

Citation

42 CFR
Part 440,
Subpart B
1902(a), 1902(e),
1905(a), 1905(p),
1915, 1920, and
1925 of the Act

3.1 Amount, Duration, and Scope of Services

(a) Medicaid is provided in accordance with the requirements of 42 CFR Part 440, Subpart B and sections 1902(a), 1902(e), 1905(a), 1905(p), 1915, 1920, and 1925 of the Act.

(1) Categorically needy.

Services for the categorically needy are described below and in ATTACHMENT 3.1-A. The arm wices include:

1902(a)(10)(A) and 1905(a) of the Act

- (i) Each item or service lested in section 1905(a)(1) through (5) and (21) of the Act, is provided as defined in 42 CFR Part 440, Subpart A, or, for EPSDT services, section 1905(r) and 42 CFR Part 441, Subpart B.
- (ii) Nurse-midwife services listed in section 1905(a)(17) of the Act, are provided to the extent that nurse-midwives are authorized to practice under State law or regulation and without regard to whether the services are furnished in the area of management of the care of mothers and babies throughout the maternity cycle. Nurse-midwives are permitted to enter into independent provider agreements with the Medicaid agency without regard to whether the nurse-midwife is under the supervision of, or associated with, a physician or other health care provider.
 - ____ Not applicable. Nurse-midwives are not authorized to practice in this State.

TN No. 94-022
Supersedes Approval Date OCT 5 1994

Effective Date 7/1/94

TN No. 92-02

Revision: HCFA-PM-91-4 AUGUST 1991

(BPD)

OMB No.: 0938-

State/Territory: ___

RHODE ISLAND

Citation

3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy (Continued)

1902(e)(5) of the Act

- (iii) Pregnancy-related, including family planning services, and postpartum services for a 60-day period (beginning on the day pregnancy ends) and any remaining days in the month in which the 60th day falls are provided to women who, while pregnant, were eligible for, applied for, and received medical assistance on the day the pregnancy ends.
- // (iv) Services for medical conditions that may complicate the pregnancy (other than pregnancy-related or postpartum services) are provided to pregnant women.

1902(a)(10), clause (VII) of the matter following (E) of the Act

(v) Services related to pregnancy (including prenatal, delivery, postpartum, and family planning services) and to other conditions that may complicate pregnancy are the same services provided to poverty level pregnant women eligible under the provision of sections 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX) of the Act.

TN NO. Effective Date 7/1/92 Approval Date nso Supersedes TN No. __90-10

Revision: HCFA-PM-91-4 (BPD) AUGUST 1991

OMB No.: 0938-

State/Territory: RHODE ISLAND

Citation

3.1(a)(1) Amount, Duration, and Scope of Services: Categorically Needy (Continued)

> (vi) Home health services are provided to individuals entitled to nursing facility services as indicated in item 3.1(b) of this plan.

1902(e)(7) of the Act

(vii) Inpatient services that are being furnished to infants and children described in section 1902(1)(1)(B) through (D), or section 1905(n)(2) of the Act on the date the infant or child attains the maximum age for coverage under the approved State plan will continue until the end of the stay for which the inpatient services are furnished.

1902(e)(9) of the // (viii)Respiratory care services are provided to ventilator dependent individuals as Act indicated in item 3.1(h) of this plan.

1902(a)(52) and 1925 of the Act

(ix) Services are provided to families eligible under section 1925 of the Act as indicated in item 3.5 of this plan.

ATTACHMENT 3.1-A identifies the medical and remedial services provided to the categorically needy, specifies all limitations on the amount, duration and scope of those services, and lists the additional coverage (that is in excess of established service limits) for pregnancy-related services and services for conditions that may complicate the pregnancy.

TN No. DEC 9 1932 Effective Date 7./1/92 Supersedes Approval Date TN No. NEW

Revision: HCFA-PM-91-4 (BPD) AUGUST 1991

OMB No.: 0938-

State/Territor	у	RHO	DE ISLAND
Citation	3.1	amoun	t, Duration, and Scope of Services (continued)
42 CFR Part 440, Subpart B	(a)((2)	Medically Needy.
Subpart B	[X]		This State plan covers the medically needy. The services described below and in <u>ATTACHMENT</u> 3.1-B are provided.
			Services for the medically needy include:
1902(a)(10)(C)(iv) of the Act 42CFR440.220		(i)	If services in an institution for mental diseases (42CFR440.140 and 440.160) or an intermediate care facility for the mentally retarded (or Both) are provided to any medically needy group, then each medically needy group is provided either the services listed in section 1905(a)(1) through (5) and (17) of the Act, or seven of the services listed in section 1905(a)(1) through (20). The services are provided as defined in 42 CFR Part 440, Subpart A and in sections 1902, 1905, and 1915 of the Act.
42CFR440.160 and 440.140			[] Not applicable with respect to nurse-midwife services under section 1902(a)(17). Nurse-midwives are not authorized to practice in this State.
1902(e)(5) of the Act		(ii)	Prenatal care and delivery services for pregnant women.

TN No. 92-02 Supersedes TN No. 87-04

Approval Date_____

Effective Date 7/1/92

Revision.	AUGUST 1991	(870)	OWB NO.: 0338-	
	State/Territory:	2.11	ODE ISLAND	
Citation	3.1(a)(2)	Amount, I	Duration, and Scope of Services: y Needy (Continued)	
	()	planni a 60-c pregna month to won for, a	ancy-related, including family ing services, and postpartum services for day period (beginning on the day the ancy ends) and any remaining days in the in which the 60th day falls are provided men who, while pregnant, were eligible applied for, and received medical tance on the day the pregnancy ends.	
	<i></i>	may co	ces for any other medical condition that omplicate the pregnancy (other than ancy-related and postpartum services) are ded to pregnant women.	•
		3.1-B	atory services, as defined in <u>ATTACHMENT</u> , for recipients under age 18 and ients entitled to institutional services.	
		<i>_</i> 7	Not applicable with respect to recipient entitled to institutional services; the plan does not cover those services for the medically needy.	. 8
		nursi	health services to recipients entitled to ng facility services as indicated in iter) of this plan.	
42 CFR 440 440.150,44 Subpart B,	0.160	(vii)Servio disea:	ces in an institution for mental ses for individuals over age 65	
442.441, Subpart C 1902(a)(20	<u>∠.</u>		ces in an intermediate care ity for the mentally retarded.	
and (21) o	if the Act /X/		tient psychiatric services for individual r age 21.	s
	92-02		2.4 (0.2 Page 4.1 (0.2	
Supersedes TN No.	Approval D		Effective Date	_

Revision: HCFA-PM-91-4

(BPD)

OMB No.: 0938-

AUGUST 1991

State/Territory:

RHODE ISLAND

Citation

3.1(a)(2)

Amount, Duration, and Scope of Services:

Medically Needy (Continued)

1902(e)(9) of the Act

<u>∠</u>/ (x)

Respiratory care services are provided to ventilator dependent individuals as indicated in item 3.1(h) of this plan.

ATTACHMENT 3.1-B identifies the services provided to each covered group of the medically needy; specifies all limitations on the amount, duration, and scope of those items; and specifies the ambulatory services provided under this plan and any limitations on them. It also lists the additional coverage (that is in excess of established service limits) for pregnancy-related services and services for conditions that may complicate the pregnancy.

TN No. 92-02 87-12 Approval Date DEC 9 1992 Supersedes Effective Date $\frac{7}{1/92}$ TN No.



Revision: HCFA-PM-97-3

(CMSO)

December 1997

RHODE ISLAND

Citation

3.1 Amount, Duration, and Scope of Services (continued)

Other Required Special Groups: Oualified (a)(3)Medicare Beneficiaries

1902(a)(10)(E)(i) and clause (VIII) of the matter following (F), and 1905(p)(3) of the Act

Medicare cost sharing for qualified Medicare beneficiaries described in section 1905(p) of the Act is provided only as indicated in item 3.2 of this plan.

1902(a)(10) (E)(ii) and 1905(s) of the Act

(a)(4)(i) Other Required Special Groups: Oualified Disabled and Working Individuals

> Medicare Part A premiums for qualified disabled and working individuals described in section 1902(a)(10)(E)(ii) of the Act are provided as indicated in item 3.2 of this plan.

1902(a)(10) (E)(iii) and 1905(p)(3)(A)(ii) of the Act

(ii) Other Required Special Groups: Specified Low-Income Medicare Beneficiaries

> Medicare Part B premiums for specified low-income Medicare beneficiaries described in section 1902(a)(10)(E)(iii) of the Act are provided as indicated in item 3.2 of this plan.

1902(a)(10) (E)(iv)(I)1905(p)(3)(A)(ii), and 1933 of the Act

(iii) Other Required Special Groups: Oualifying Individuals - 1

> Medicare Part B premiums for qualifying individuals described in 1902(a)(10)(E)(iv) (I) and subject to 1933 of the Act are provided as indicated in item 3.2 of this plan.

TN No. 98-002 Approval Date 4-23-98 Effective Date 1/1/98Supersedes TN No. 93-005



Revision: HCFA-PM-97-3

(CMSO)

December 1997

State:

RHODE ISLAND

1902(a)(10)

(E)(iv)(II), 1905(p)(3)(A)(iv)(II), 1905(p)(3)

the Act

(iv) Other Required Special Groups: Oualifying Individuals - 2

> The portion of the amount of increase to the Medicare Part B premium attributable to the Kome Health provisions for qualifying individuals described in 1902(A)(10)(E)(iv) (II) and subject to 1933 of the Act are provided as indicated in item 3.2 of this plan.

1925 of the Act

(a)(5)

Other Required Special Groups: Families Receiving Extended Medicaid Benefits

Extended Medicaid benefits for families described in section 1925 of the Act are provided as indicated in item 3.5 of this plan.

TN No. _98-002

Approval Date 4-33-98 Effective Date $\frac{1/1/98}{}$ Supersedes

TN No. NEW

Revision: HCFA-PM-91-4 (BPD) OMB No.: 0938-

AUGUST 1991

State/Territory: RHODE ISLAND

Citation 3.1 A

3.1 Amount, Duration, and Scope of Services (Continued)

Sec. 245A(h)

(a)(6) Limited Coverage for Certain Aliens

of the Immigration and Nationality Act

- (i) Aliens granted lawful temporary resident status under section 245A of the Immigration and Nationality Act who meet the financial and categorical eligibility requirements under the approved State Medicaid plan are provided the services covered under the plan if they--
 - (A) Are aged, blind, or disabled individuals as defined in section 1614(a)(1) of the Act;
 - (B) Are children under 18 years of age; or
 - (C) Are Cuban or Haitian entrants as defined in section 501(e)(1) and (2)(A) of P.L. 96-422 in effect on April 1, 1983.
- (ii) Except for emergency services and pregnancy-related services, as defined in 42 CFR 447.53(b) aliens granted lawful temporary resident status under section 245A of the Immigration and ationality Act who are not identified in items 3.1(a)(6)(i)(A) through (C) above, and who meet the financial and categorical eligibility requirements under the approved State plan are provided services under the plan no earlier than five years from the date the alien is granted lawful temporary resident status.

TN No. 92-02 Supersedes Approval Date TN No. 87-12	Effective Date 7./1/92
IN NO	HCFA ID: 7982E

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Revision:	HCFA-PM-9	_	(BPD)		OMB No.: 0938-	
\$	State/Terr	itory:_	RH	ODE ISLAND		
<u>Citation</u>	3.1(a)(6)	Amount, I	Ouration, and Sco for Certain Alie	pe of Services: Limins (continued)	ted
1902(a) and of the Act	i 1903(v)	(1)	permanersid. law withis paymenter and seemerge	nent residence or ing in the United no meet the eligi- plan, except for ot of AFDC, SSI, nt, are provided ervices necessary ency medical cond	livery) as defined :	of nder ntary are of an
1905(a)(9) the Act	of	(a)(7)	Clinic sindividudwelling address regarding furnished	or do not have a are provided with g the site at whi	side in a permanent fixed home or mail out restrictions ch the services are	ing
1902(a)(47) and 1920 of the Act		(a)(8)	Ambulato women is eligibil	ry prenatal care provided during ity period if the that is eligible	for pregnant	b y a th e
42 CFR 441. 50 FR 43654 1902(a)(43) 1905(a)(4)(and 1905(r) the Act	(B),	(a)(9)	sections 1905(r) periodic	caid agency meets 1902(a)(43), 190 of the Act with r	the requirements o 5(a)(4)(B), and espect to early and ostic, and treatmen	L

TN No. 92-02 Supersedes Approval Date TN No. NEW	DEC 9 1932	Effective Date 7/1/92
IN NO. NEW		HCFA ID: 7982F